

# Candidate Intention Statement

Type or Print in Ink.

CANDIDATE INTENTION STATEMENT

Check One: ☒ Initial ☐ Amendment (Explain) \_\_\_\_\_

Date Stamp <b>RECEIVED</b> 2012 JAN 12 PM 3:26	<b>CALIFORNIA FORM 501</b> For Official Use Only
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## 1. Candidate Information:

NAME OF CANDIDATE (Last, First, Middle Initial) Curry, Keith	DAYTIME TELEPHONE NUMBER 949-644-0800	FAX NUMBER (optional)	E-MAIL (optional)
STREET ADDRESS 40 Vienna	CITY Newport Beach	STATE CA	ZIP CODE 92660
OFFICE SOUGHT (POSITION TITLE) City Council Member	AGENCY NAME	DISTRICT NUMBER, if applicable. 7	<input checked="" type="checkbox"/> NON-PARTISAN PARTY:
OFFICE JURISDICTION <input type="checkbox"/> State (Complete Part 2.) <input checked="" type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Multi-County: <u>Newport Beach</u> <small>(Name of Jurisdiction)</small>			
		2012 <small>(Year of Election)</small>	

## 2. State Candidate Expenditure Limit Statement:

(CalPERS candidates, judges, judicial candidates, and candidates for local offices are not required to complete Part 2.)

                     Primary/general election                      Special/runoff election  
(Year of Election) (Year of Election)

(Check one box)

☐ I accept the voluntary expenditure ceiling for the election stated above.

☐ I do not accept the voluntary expenditure ceiling for the election stated above.

Amendment:

☐ I did not exceed the expenditure ceiling in the primary or special election held on: \_\_\_\_\_ and I accept the voluntary expenditure ceiling for the general or special run-off election.

(Mark if applicable)

☐ On \_\_\_\_\_, I contributed personal funds in excess of the expenditure ceiling for the election stated above.

## 3. Verification:

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Executed on 1/11/12  
(month, day, year)

Signature [Signature]  
(Candidate)

FPPC Form 501 (Jan/05)  
 FPPC Toll-Free Helpline: 866/ASK-FPPC  
 866/275-3772